## REQUEST FOR RELEASE FOR UAW GRIEVANCE INVESTIGATION

This form requesting release to investigate a grievance(s) as authorized by Article 8, Section F. of the UAW & State of Michigan contract, must be completed by the Chief Steward and approved by the appropriate supervisor before release is authorized.

SECTION A			
DEPARTMENT	AGENCY		
WORK SITE	DATE		
CHIEF STEWARD	SOCIAL SECURITY NO.		
SECTION B			
RELEASE TIME BEGINNING AT	TRAVEL TIME (if any)	DATE	
RETURN TIME	DATE		
This time is necessary to investigate the grieva investigation or grievance number, grievant, super		need for	
CHIEF CTEWARD'S CIONATURE	DATE		
CHIEF STEWARD'S SIGNATURE	DATE		
SUPERVISOR'S SIGNATURE	DATE		
SECTION C			
ACTUAL TIME RETURNED	SUPERVISOR'S INITIALS		
TO BE COMPLETED BY SU	PERVISOR UPON RETURN		
TOTAL ADMINISTRATIVE LEAVE TIME	TOTAL TRAVEL TIME		
PAY PERIOD ENDING DATE			

OSE-13 (12/87) Department of Management and Budget

## **INSTRUCTIONS FOR COMPLETING FORM**

<u>WHO</u>	DOES WHAT	
Chief Steward	1.	Complete Sections A and B of form.
	2.	Presents it to appropriate Supervisor for approval.
Supervisor	1.	Reviews request. If release is approved, signs the form.
	2.	Provides Chief Steward with the GOLD copy.
	3.	Retains remainder of the packet.
Chief Steward	1.	Upon completing investigation, returns to Supervisor and indicates time returned on the packet retained by the Supervisor.
Supervisor	1.	Verifies time of return by initialing Section C and provides PINK copy to Chief Steward.
	2.	Completes Supervisor's Section of form.
	3.	Retains YELLOW copy.
	4.	Forwards WHITE copy to Personnel or Labor Relations as per Department instructions.
A LEG and Comments and beginning		

## **Additional Supervisory Instructions:**

- 1. Administrative leave time used for investigation is to be recorded in the M counter.
- 2. Travel time necessary to conduct the investigation is not to be covered by administrative leave. Necessary travel time should be covered by annual leave or take place during non-working hours.